



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

|                                    |
|------------------------------------|
| FILE NUMBER                        |
| TOTAL PAGES IN ENTIRE CFA-4 REPORT |
| 6 PAGES                            |

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

| COMMITTEE INFORMATION   |  |   |
|---|--|---|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name<br><b>Jennifer L. Kehl for Fishers City Clerk</b>  |  |   |
| 2. Acronym or Abbreviated Name (if any)   |  | 3. Committee Telephone Number<br><b>( 317 ) 691-2635</b>  |
| 4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check If this is a new address<br><b>7655 Concord Lane</b>  |  |   |
| 5. City, State, ZIP Code<br><b>Fishers, Indiana 46038</b>   |  | 6. Party Affiliation (if applicable) <b>Republican</b>  |
| CANDIDATE INFORMATION (For Candidate's Committees Only)   |  |   |
| 7. Full Name of Candidate (include any nickname) <b>Jennifer L. Kehl</b>  |  | 8. Party Affiliation or If Independent Candidate  |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.)<br><b>Fishers City Clerk</b>  |  | 10. County of Residence <b>Hamilton</b>   |
| TYPE OF REPORT  |  | CONVENTION CANDIDATES ONLY  |
| 11. Check one:<br><input checked="" type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____<br><input type="checkbox"/> Final/Disbands Committee (lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (within 10 days amend Statement of Organization) |  | Check one:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
| 12. Reporting Period:<br>From: <b>JANUARY 1, 2014</b> Through: <b>April 18, 2014</b>  |  | COLUMN A<br>This Period   |
| 13. Cash on hand and investments at the beginning of this reporting period.   |  | <b>\$ 0.00</b>  |
| 14. Cash on hand and investments January 1, current year.   |  | <b>\$0.00</b>   |
| CONTRIBUTIONS AND RECEIPTS  |  |   |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.)   |  |   |
| 15a. Itemized (use Schedule A)  |  | <b>\$ 1,900.00</b>  |
| 15b. Unitemized   |  |   |
| 15c. Add lines 15a and 15b in both columns SUBTOTAL   |  | <b>\$ 1,900.00</b>  |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL   |  | <b>\$ 1,900.00</b>  |
| EXPENDITURES  |  |   |
| (Note: These amounts include in-kind expenditures and loan repayments.)   |  |   |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C)  |  | <b>\$ 940.85</b>  |
| 17b. Unitemized   |  |   |
| 17c. Add lines 17a and 17b in both columns SUBTOTAL   |  | <b>\$ 940.85</b>  |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL   |  | <b>\$ 959.15</b>  |
| 19. Debts OWED BY the committee (use Schedule D)  |  | <b>\$ 0.00</b>  |
| 20. Debts OWED TO the committee (use Schedule E)  |  | <b>\$ 0.00</b>  |

|   |                        |
|---|------------------------|
| CERTIFICATION   |                        |
| I, _____, of MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.  |                        |
| Title   | Date                   |
|   | Date <b>04/18/2014</b> |
| for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly person who fails to file a complete or accurate report as required by the Indiana ) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18) |                        |

FOR OFFICE USE ONLY

APR 21 AM 7:45

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INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

| FILE NUMBER   |
|---------------|
|               |
| Page 01 of 02 |

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)                  | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|--|---|-----------------------------------|--|---------------------------------|
| 1.<br>Jennifer L. Kehl<br>7655 Concord Lane<br>Fishers, IN 46038<br><br>Contributor's Occupation (if required) _____       | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input checked="" type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$100.00                          |  | 02/05/2014                      |
| 2.<br>Lori Lutz<br>11976 Quarry Ct.<br>Fishers, IN 46037<br><br>Contributor's Occupation (if required) _____               | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$700.00                          |  | 02/27/2014                      |
| 3.<br>Dave Darnell<br>13948 Conner Knoll Pkwy<br>Fishers, IN 46037<br><br>Contributor's Occupation (if required) _____     | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$100.00                          |  | 03/22/2014                      |
| 4.<br>Steve Hardin<br>12004 Hollyhook Drive<br>Fishers, IN 46037<br><br>Contributor's Occupation (if required) _____       | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$100.00                          |  | 03/26/2014                      |
| 5.<br>Tom and Gayle Kehl<br>11743 Whisperwood Way<br>Fishers, IN 46037<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$100.00                          |  | 04/11/2014                      |
| SUBTOTAL THIS PAGE OF SCHEDULE A   |   | \$ 1,100.00                       |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet)                   |   | \$                                |  |                                 |



INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

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| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)               | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|---|---|-----------------------------------|--|---------------------------------|
| 1.<br>Arthur and Lou Ann Hennig<br>11203 Red Fox Run<br>Fishers, IN 46038<br><br>Contributor's Occupation (if required) | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) | \$100.00                          |  | 04/16/2014                      |
| 2.<br><br>Contributor's Occupation (if required)  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)            |                                   |  |                                 |
| 3.<br><br>Contributor's Occupation (if required)  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)            |                                   |  |                                 |
| 4.<br><br>Contributor's Occupation (if required)  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)            |                                   |  |                                 |
| 5.<br><br>Contributor's Occupation (if required)  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)            |                                   |  |                                 |
| SUBTOTAL THIS PAGE OF SCHEDULE A  |   | \$ 100.00                         |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet)                |   |                                   |  |                                 |



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-2)  
CONTRIBUTIONS BY CORPORATIONS**  
**Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE.** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee).

|                             |
|-----------------------------|
| FILE NUMBER                 |
|                             |
| Page <u>01</u> of <u>01</u> |

| CONTRIBUTOR'S FULL NAME AND<br>FULL MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                                    | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|--|---|-----------------------------------|--|---------------------------------|
| 1.<br><b>A &amp; F Engineering</b><br><b>Steve Fehribach</b><br><b>8364 Keystone Crossing #201</b><br><b>Indianapolis, IN 46240-2685</b> | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i> | <b>\$200.00</b>                   |  | <b>03/05/2014</b>               |
| 2.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i>            |                                   |  |                                 |
| 3.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i>            |                                   |  |                                 |
| 4.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i>            |                                   |  |                                 |
| 5.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i>            |                                   |  |                                 |
| SUBTOTAL THIS PAGE OF SCHEDULE A   |   | \$ 200.00                         |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 15a of the Summary Sheet)</i>                          |   | \$                                |  |                                 |



(CFA-4 SCHEDULE A-4)  
CONTRIBUTIONS BY  
POLITICAL ACTION COMMITTEES  
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions **regardless of amount** from political action committees **MUST** be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

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| CONTRIBUTOR'S FULL NAME AND<br>FULL MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                 | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br><br>RECEIVED BY |
|---|---|-----------------------------------|--|-------------------------------------|
| 1.<br>Hamilton County Professional Fire<br>Fighters Local #4416 PAC<br>399 South 14th Street<br>Noblesville, IN 46060 | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i> | \$500.00                          |  | 04/13/2014                          |
| 2.  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i>            |                                   |  |                                     |
| 3.  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i>            |                                   |  |                                     |
| 4.  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i>            |                                   |  |                                     |
| 5.  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind <i>(describe)</i><br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. <i>(specify)</i>            |                                   |  |                                     |
| SUBTOTAL THIS PAGE OF SCHEDULE A  |   | \$ 500.00                         |  |                                     |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 15a of the Summary Sheet)</i>       |   | \$1900.00                         |  |                                     |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

FILE NUMBER

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| RECIPIENT'S NAME AND MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                          | RECIPIENT'S OCCUPATION<br><i>OFFICE SOUGHT (if applicable)</i> | TYPE OF EXPENDITURE<br>and<br>PURPOSE <i>(be specific)</i>  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE |
|---|--|---|-----------------------------------|--|------------------------|
| Code <u>F</u><br>Fishers Freedom Festival<br>P.O. Box 930<br>Fishers, IN 46038                                  | Not-for-Profit   | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input checked="" type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: Reimburse _____ for<br>Chamber Luncheon | \$ 20.00                          |  | 02/21/2014             |
| Code <u>A</u><br>Campaign Pros.com<br>5200 30th Street SW<br>Davenport, IA 52802                                | Campaign Materials   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: Campaign Signs                          | \$ 686.00                         |  | 03/03/2014             |
| Code <u>A</u><br>Regal Printing<br>485 Gradle Drive<br>Carmel, IN 46032   | Campaign Materials   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: Stickers                                | \$ 229.85                         |  | 04/10/2014             |
| Code <u>O</u><br>Regions Bank<br>7447 E 116th St<br>Fishers, IN 46038   | Banking Institution  | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: Bank Charge<br>Monthly Fee              | \$ 5.00                           |  | 03/26/2014             |
| Code _____  |  | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:  |                                   |  |                        |
| Code _____  |  | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:  |                                   |  |                        |
| Code _____  |  | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:  |                                   |  |                        |
| SUBTOTAL THIS PAGE OF SCHEDULE B  |  |   | \$ 940.85                         |  |                        |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 17a of the Summary Sheet)</i> |  |   | \$ 940.85                         |  |                        |